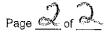
Tributa de contra de la contra de contra	GN FINANCE REPORT IMITTEES OF WISCO	· 1			
Is This Report an Amendment: Yes	No		AEOE		
Instructions for completing schedules are on the b	ack of each schedule.		JECEIVER		
COMMITTEE IDENTIFICATION	HEREN BANDEN EN E		JUL 13 2022		
Name of Committee	and Ban District	pa //	ev. Can		
Street Address	een Bay-District	OF	FICE USE ONLY		
1244 Emile Street City, State and Zip Code					
Green Bay, WI 54301					
Please check if address is different than previously reported,	and complete the Campaign Reg	gistration Statement in the I	oack of this form.		
NAME OF REPORT	тина алимпература на принципература на принципература на принципература на принципература на принципература на	niet galen voor de kommonde de en meent gewene de ser kook eels ook de kook meen de skeep de ser de se de se d			
January Continuing Pre-Primary					
July Continuing Pre-Election	Spring	Fall Special	Termination Report also complete Schedule 4		
SUMMARY OF RECEIPTS AND	Column A	Column B	3		
DISBURSEMENTS	This Period	Calendar			
1. RECEIPTS		Year-To-Date			
1A. Contributions (Including Loans) from Individuals	\$ -0-	\$ 930.00	of our management of the control of		
1B. Contributions from Committees (Transfers-In)	\$ -0-	\$ -0-			
1C. Other Income and Commercial Loans	\$.05	\$.05			
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 930.60	\$ 930.65			
2. DISBURSEMENTS					
2A. Gross Expenditures	\$ -0-	\$ -0-			
2B. Contributions to Committees (Transfers-Out)	\$ - 0-	\$ -0-			
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ -0-	s - O -			
CASH SUMMARY					
Cash Balance Beginning of Report	s 930. 60		_		
Total Receipts	\$.05				
Subtotal	\$ 930.65				
Total Disbursements	\$ -0-				
CASH BALANCE END OF REPORT	\$ 930.65				
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	s - 0 -				
LOANS (Balance at the Close of This Period-3B)	\$ - 0 -				
I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.					
Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: /	1=13-2022		
Darlene Marcelle	Darline Marcelle		Phone: 920 - 468-1191		

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.



RECEIPTS Contributions (Including Loans) From Individuals



Galv	mittee Name N for Alderperson-G	rreen Bay-District 4		
Instructions Date	or completing schedules are on the back of each so Full Name, Mailing Address and Zip Code Of Contributor	hedule. Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
		<i>f</i>		
		N/A		
	Check if: [] In-Kind [] Loan Conduit – Ethics ID#			
		1 1 1 1		
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Check if: ☐ In-Kind ☐ Loan Conduit — Ethics ID#			
	Officers Emission Emission Emission	1		
	Check if: in-Kind Loan Conduit - Ethics (D#			
		1 		
		i i i i		
	Check if: In-Kind Loan Conduit - Ethics ID#			
	Check if: ☐ In-Kind ☐ Loan☐ Conduit — Ethics ID#			
	Check if: Tin-Kind Loan Conduit Ethics ID#			
		,		
	Check if: In-Kind In Loan Conduit – Ethics ID#			
		ITEMIZED CONTRIBUTIONS THIS PAGE	s - O -	
		\$ -0-		
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			s - O -	
	TOTAL CONTRIB	LITIONS DECEIVED EDOM INDIVIDUALS	\$ - C	

SCHEDULE 1-B

RECEIPTS Contributions from Committees (Transfers-In)

Page **3** of <u>3</u>

Complete Committee Name Gawin for Alderperson Green Bay-District 4 Instructions for completing schedules are on the back of each schedule.

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
	Check If: [] In-Kind [] Loan	
	Check if: [] In-Kind [] Loan	
	Check if: ☐ tn-Kind ☐ Loan	
	Check if: [i] In-Kind [i] Loan	
	Check If:	
	Check if: In-Kind	
	Check if: In-Kind Loan Check if: In-Kind Loan	
	Check if: [] in-Kind [] Loan	
	SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	s - 0 - s - 0 -

SCHEDULE 1-C

RECEIPTS Other Income and Commercial Loans

Page 4 of 4

Complete Committee Name
Galvin for Alderberson-Green Boy
Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
	Interest ON .		
	Interest ON : Bank account		
1/22			.02
为为之			.01
5/1/22			.01
1/9/22			.01

SUBTOTAL OTHER INCOME THIS PAGE \$ -105-

TOTAL OTHER INCOME \$ -.65



DISBURSEMENTS Gross Expenditures

Page <u>5 of 5</u>

Complete Committee Name

Galvin for Alder person - Green Bay - District 4

Instructions for completing schedules are on the back of each schedule.

	completing sellectures are on the back of each sellecture,		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
		A/	
	Check if: 🗍 In-Kind Offset	11/	
		1	
	Check if: C In-Kind Offset	_	
	Check if:		
	Check If: [7] In-Kind Offset	·	
-	Check if: [] In-Kind Offset		
-	Check if:		
	Check If: 📵 In-Kind Offset		
	Check ii. [L] In-Kind Onset		
	Check if: C In-Kind Offset		
	en	BTOTAL ITEMIZED EXPENDITURES THIS PAGE	s - />-
	30.	BIOIAL II EMIKED EAFEMDIIORES IRIS PAGE	• • •
		TOTAL ITEMIZED EXPENDITURES	\$ -0 -
		TOTAL UNITEMIZED EXPENDITURES	s - 0 -
		TOTAL EXPENDITURES	ea (**) 193

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees (Transfers-Out)

Page 6 of 6

tions for completing	schedules are on the back of each schedule.		
ate	Full Name, Malling Address and Zip Code	Amount	Y-T-I Tota
Check if:	☐ In-Kind ☐ Loan		
Check if:	☐ In-Kind ☐ Loan		
Check If:	□ In-Kind □ Loan		
Check if:	C In-Kind 🗆 Loan		
Check if:	in-Kind in Loan		
Check if:	☐ in-Kind ☐ Loan		
			4
Check if:	□ In-Kind □ Loan		
	3		
Check If:	☐ In-Kind ☐ Loan		-

TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES \$

SCHEDULE 3-A

Incurred Obligations Excluding Loans ADDITIONAL DISCLOSURE

Complete C	ommittee Name VIN for Alderperson-	GreenBay	District	4	
	s for completing schedules are on the back of each				
		Outstanding Balance Beginning This Perlod	New Obligations or Additions This Period	Cumulative Paymen This Period	ts Outstanding Balance At Close of This Period
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
, ,		Nature of Debt (Purpose)			
Date /	Full Name, Mailing Address and Zip Code of Creditor		PA		
		Nature of Debt (Purpose)			
Date	Full Name, Malling Address and Zip Code of Creditor				
į į		Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zlp Code of Creditor				
/ /		Nature of Debt (Purpose)	,		
Date /	Full Name, Mailing Address and Zip Code of Creditor	:			
1 1		Nature of Debt (Purpose)	<u> </u>		
Date	Full Name, Mailing Address and Zip Code of Creditor				
/ /		Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1		Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1					
		Nature of Debt (Purpose)			
		SUBTOTAL ITEMIZE	O OBLIGATIONS THIS	PAGE \$	- Ø -
		тот	AL ITEMIZED OBLIGA	TIONS \$	-0-
		TOTAL UNITEMIZED	- O -		
		TOTAL INCURRED OBLIGATIONS			

SCHEDULE 3-B

Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

Page $\widehat{\mathscr{S}}$ of $\widehat{\mathscr{S}}$

TOTAL OUTSTANDING LOANS \$ 0

Galvin for Alderperson-Green Bay-District 4

Instructions for completing schedules are on the back of each s						
Full Name, Mailing Address and Zip Code of Loan Sou	rce	Outstanding		Cumulative	Outstanding	
		Obligations Beginning of This	New Loans This	Payments This Period	Obligations End of This Period	
		Period	Period	THIS F OLIGIE	LIII OI TIIIS FEIIOG	
Date						
	<u>, </u>				-	
List All Endorsers or Guarantors (if any)	•					
Total Marie Marie Marie Address and The Ondo	Opporantian					
Full Name, Malling Address and Zlp Code of Guarantor	Occupation					
or ordinated	Amount Guarantee	od Outstanding				
		od Odistanding			1	
	\$					
Full Name, Mailing Address and Zip Code	Occupation					
of Guarantor	, in the second					
	Amount Guarantee	d Outstanding				
	\$					
	"					
	•					
Full Name, Malling Address and Zip Code of Loan Sou	rce	Outstanding		Cumulative	Outstanding	
		Obligations		Payments	Obligations	
		Beginning of This Period	New Loans This Period	This Period	End of This Period	
Date		Penoa	Period			
List All Endorsers or Guarantors (if any)						
Full Name, Mailing Address and Zip Code	Occupation					
of Guarantor						
	Amount Guaranteed Outstanding					
	\$					
					İ	
Full Name, Mailing Address and Zip Code	Occupation					
of Guarantor						
	Amount Guaranteed Outstanding					
	\$					
	,					
				O		
Full Name, Mailing Address and Zip Code of Loan Sou	rce	Outstanding Obligations		Cumulative Payments	Outstanding Obligations	
	İ	Beginning of This	New Loans This	This Period	End of This Period	
		Period	Period	·		
Date						
List All Endorsers or Guarantors (If any)				······		
Electric Literature (in except						
Full Name, Mailing Address and Zip Code	Occupation				-	
of Guarantor	•					
	Amount Guarantee	d Outstanding				
		•				
	\$					
E ON STATE AND STATE OF A	Canunattaa					
Full Name, Mailing Address and Zip Code of Guarantor	Occupation					
we want at the	Amount Currenteed Outstanding					
	Amount Guaranteed Outstanding					
	\$					
	·					
		SUBTOTAL O	UTSTANDING LOA	NS THIS PAGE	s -0 -	